

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) LOURDES LOZANO  
Name

(2) 7405 W 16 AVE.  
Address (number and street)

MIAMI, FL. 33014  
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: \_\_\_\_\_

OFFICE USE ONLY

APR11'19 4:25PM

(4) Check appropriate box(es):

☒ Candidate Office Sought: CITY COUNCIL GROUP I

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

## (5) Report Identifiers

Cover Period: From 3 / 01 / 19 To 3 / 31 / 19 Report Type: M3

☐ Original

☒ Amendment

☐ Special Election Report

## (6) Contributions This Report

Cash & Checks \$ 200 , 00 , \_\_\_\_ . \_\_\_\_

Loans \$ \_\_\_\_ , \_\_\_\_ , \_\_\_\_ . \_\_\_\_

Total Monetary \$ 200 , 00 , \_\_\_\_ . \_\_\_\_

In-Kind \$ \_\_\_\_ , \_\_\_\_ , \_\_\_\_ . \_\_\_\_

## (7) Expenditures This Report

Monetary Expenditures \$ 00 , 00 , \_\_\_\_ . \_\_\_\_

Transfers to Office Account \$ \_\_\_\_ , \_\_\_\_ , \_\_\_\_ . \_\_\_\_

Total Monetary \$ 00 , 00 , \_\_\_\_ . \_\_\_\_

## (8) Other Distributions

\$ \_\_\_\_ , \_\_\_\_ , \_\_\_\_ . \_\_\_\_

## (9) TOTAL Monetary Contributions To Date

\$ 200 , 00 , \_\_\_\_ . \_\_\_\_

## (10) TOTAL Monetary Expenditures To Date

\$ 00 , 00 , \_\_\_\_ . \_\_\_\_

## (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) RICARDO IRIZARRY

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Ricardo Irizarry  
Signature

(Type name) LOURDES LOZANO

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Lourdes Lozano  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name LOURDES LOZANO(2) I.D. Number APR11'19 4:25PM(3) Cover Period 03/01/19 through 03/31/19 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type      Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
03/04/19 1	LOURDES LOZANO 7405 W 16 AVE HIALEAH FL 33014	I	SALES COORDINATOR	CHE TEL		✓	200.00
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